

Building a healthy, active Australia



Why we need to act

The way we are - some important facts

- More than half of the Australian population are overweight or obese – an epidemic common at all ages, in all parts of Australia and throughout all population groups.
- An estimated 1.5 million people aged under 18 are considered overweight or obese.
- About 20-25% of Australian children are overweight or obese, with the proportion fast increasing, particularly since the mid-1980s – a trend which reflects international patterns.
- Approximately 9 million Australians over the age of 18 were estimated to be overweight or obese in 2001. Those levels have increased rapidly in the last twenty years.
- Our National Health and Medical Research Council (NHMRC) recommends at least two serves of fruit and five serves of vegetables per day. The 2001 National Health Survey showed that only 30% of people aged 12 years or more usually ate four or more serves of vegetables per day and 53% ate two or more serves of fruit.
- The financial burden associated with obesity in Australia was estimated to be \$1.2 billion in 2000.
- Outside of school hours, 62% of children aged 5-14 years participated in organised sport in 2003.
 - This means that about 40% of children are missing out on an outside school hours sporting activity.
- Of all physical activities swimming had the greatest participation rate overall (17%). Outdoor soccer was most popular for boys (13%) and netball for girls (18%).

What this means for our health

Statistics from the Australian Institute of Health and Welfare tell the story:

- Physical inactivity and high blood pressure were the second and third most common risk

factors contributing to disease in Australia in 1996.

- Heart disease and stroke were the two leading causes of death in 2002.
- Food and nutrient intake of energy increased significantly, by nearly 15% for boys and nearly 12% for girls, between 1985 and 1995, mainly attributable to an increased intake of foods including cereals, confectionary, non-alcoholic beverages and sugar products.

Why this matters in countries like Australia

- The World Health Organisation (WHO) has found that poor nutrition and physical inactivity contribute substantially to the global burden of disease, death and disability. WHO says "a profound shift in the balance of the major causes of death and disease has already occurred in developed countries and is under way in many developing countries."
- The major risk factors that account for much of the morbidity and mortality in most countries are closely related to diet and physical activity: high blood pressure, high concentrations of cholesterol in the blood, inadequate intake of fruit and vegetables, overweight or obesity, physical inactivity and tobacco use.
- Obesity in childhood is associated with increased adult cardiovascular morbidity and mortality, regardless of adult weight.
- Being overweight in childhood is also associated with increased risk factors for heart disease such as raised blood pressure, blood cholesterol and blood sugar.
- The prevalence of Type II diabetes is also reported to be on the rise in children and adolescents.
- Other medical conditions related to childhood obesity include respiratory disorders, orthopaedic problems, arthritis, hepatic

complications, and decreased release of growth hormone, gastroesophageal reflux and gastric emptying disturbances.

- Obesity is a risk factor for sleep-associated breathing disorders and may be associated with asthma.
- Physical activity in children and youth is associated with beneficial effects and health outcomes in skeletal health and psychological health.
- A study estimating the cost of diseases such as coronary heart disease, Type II diabetes, colon cancer, breast cancer, depression and stroke resulting from inactivity suggested that every 1 percent increase in the proportion of physically active people could be expected to save 122 lives lost through coronary heart disease, colon cancer and Type II diabetes.

What the WHO recommends

- The overall goal of the WHO's Global Strategy on Diet, Physical Activity and Health is "to promote and protect health by guiding the development of an enabling environment for sustainable actions at individual, community, national and global levels that, when taken together, will lead to reduced disease and death rates related to unhealthy diet and physical inactivity."
- The WHO makes the following recommendations for populations and individuals in relation to diet:
 - Achieve energy balance and a healthy weight.
 - Limit energy intake from total fats and shift fat consumption away from saturated fats to unsaturated fats and towards the elimination of trans-fatty acids.
 - Increase consumption of fruits and vegetables, and legumes, whole grains and nuts.
 - Limit the intake of free sugars.

- Limit salt (sodium) consumption from all sources and ensure that salt is iodized.

- The WHO recognises that "physical activity is a fundamental means of improving the physical and mental health of individuals", reduces blood pressure, improves cholesterol levels, helps control blood glucose levels in overweight people, and helps prevent colon and breast cancer.
- The WHO recommends that individuals should engage in regular, adequate exercise throughout their lives, and that different types and amounts of physical activity are required for different health outcomes. For example, an individual's risk of cardiovascular disease, diabetes, colon and breast cancer can be reduced by 30 minutes of regular, moderate-intensity physical activity on most days. Among older adults, falls may be prevented by strengthening muscles and improving balance.
- Education, communication and public awareness provide a sound basis for action on obesity and overweight.
- Schools should adopt policies and programmes to protect children's health by promoting healthy eating, physical activity and other healthy behaviours.